

**DOMESTIC
LIMITED PARTNERSHIP**

STATE OF MAINE

**NOTIFICATION BY REGISTERED
AGENT OF CHANGE IN NAME
OR REGISTERED OFFICE**

(Name of Limited Partnership)

- ☐ Names of additional limited partnerships, to which a copy of this notice has been sent to a general partner thereof, are attached hereto as Exhibit ____, and made a part hereof.

Filing Fee \$20.00 for each limited partnership listed

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 31 MRSA §407.2.B. and §422.3.D., the undersigned gives notice of a change of registered agent's name and/or **registered** office address of each limited partnership listed herein:

FIRST: Name of registered agent appearing on the record in the Secretary of State's office _____

SECOND: New name of registered agent (if no change, so indicate) _____

THIRD: Address of registered office appearing on the record in the Secretary of State's office

(street, city, state and zip code)

FOURTH: New address of registered office (if no change, so indicate)

(physical location - street (not P.O. Box), city, state and zip code)

(mailing address if different from above)

DATED _____

REGISTERED AGENT*

(signature)

(type or print name)

For Registered Agent which is a Corporation

Name of Corporation _____

By _____
(authorized signature)

(type or print name and capacity)

*Certificate **MUST** be signed by the **registered agent**.

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under Title 17-A, **section** 453.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**